

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY	

TATE OF HAWAII
STATE ETHICS COMMISSIO

COIDY Y.B

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

	(Type of F	Print Clearly)	
PART I LOBBYIST		-	
NAME(Last)	(First)	(Middle)	TELEPHONE
Catalani,	Реггу	Roy	(808) 543-9409
MAILING ADDRESS (Street)			FAX
P.O. Box 3288	<u> </u>		(808) 543-9458
(City)	(State)	(Zip	Code)
Honolulu,	Hawaii	9680	1
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Young Brothers, Limited			(808) 543-9311
MAILING ADDRESS (Street)			FAX
P.O. Box 3288			(808) 543-9458
(City)	(State)	(Zip	Code)
Honolulu,	Hawaii	9680	1

PART II ORGANIZATION		-		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE (808) 543-9311		
Young Brothers, Limited				
MAILING ADDRESS (Street)	· · · · · · · · · · · · · · · · · · ·	FAX		
P.O. Box 3288		(808) 543-9458		
(City)	(State)	(Zip Code)		
Honolulu,	Hawaii	96801		
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT				
Perry Roy Catalani		(808) 543-9409		
MAILING ADDRESS (Street)		FAX		
P.O. Box 3288		(808) 543-9458		
(City)	(State)	(Zip Code)		
Honolulu,	Hawaii	96801		

PART II	I DESCRIPTION O	OF SUBJECTS UPON WHICH	H YO	J EXPECT TO LOBBY	_		
[] Ag	riculture	[] Education	[]	Human Services	[]	Science, Technology & Economic Development	
	ommunications & ablic Utilities	[X] Government Operations & Finance	[]	Intergovernmental Relations, International Affairs	[]	Tourism & Recreation	
	onsumer Protection Commerce	[] Hawaiian Affairs	[]	Labor & Employment	[X]	Transportation	
	ılture, Arts, Historic eservation	[] Health	[]	Planning, Land & Water Use Management	[]	Other: (indicate below)	
	ology, Energy vironmental Protection	[] Housing	[]	Public Safety & Corrections			
PART I	V CERTIFICATION	N OF LOBBYIST					
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.							
	\ \	(Signature of Lobbyist)				(Date)	
PART V	/ AUTHORIZATIO	N TO LOBBY					
NAME			TIT	LE OF AUTHORIZING OFFICE	ROR	PERSON REPRESENTED	
Glenn K.\	Y. Hong		Pro	esident			
NAME OF	F ORGANIZATION (if app	olicable)		· -	LEPHO		
Young Br	others, Limited			(8	08) 543	-9322	
MAILING ADDRESS (Street)							
P.O. Box	3288			(8	08) 543	-9458	
Honolulu,	(City)	(State) Hawaii		(Zip Cod 96801	e)		
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.							
[2-7-0+							
	4Signate	ure of Authorizing Officer or Person	Repres	ented)		(Date)	